

**SUMMARY OF THE
ACCREDITING AUTHORITY COMMITTEE MEETING
DECEMBER 06, 2001**

The Accrediting Authority Committee of the National Environmental Laboratory Accreditation Conference (NELAC) met on Thursday, December 6, 2001 at 1:30 p.m. Eastern Standard Time (EST) as part of the Seventh NELAC Interim Meeting in Arlington, VA. The meeting was led by Chairperson Louis Johnson of the Louisiana Department of Environmental Quality. A list of action items is given in Attachment A. A list of participants is given in Attachment B. The purpose of the meeting was to discuss the agenda items which follow.

INTRODUCTION

Mr. Louis Johnson welcomed the committee members to the conference and took attendance.

MOBILE LABORATORY ISSUES RELATING TO CHAPTER 6

At the start of the meeting, Mr. Johnson stated that the intention of this meeting is NOT to define mobile laboratories.

Larry Penfold reported that the Chapter 4 Committee asked the Accrediting Authority (AA) Committee to consider differences in certification requirements for mobile laboratories in Section 4.0.c as compared to Section 6.2.2.a. The Committee was asked to consider a revision to 6.2.2.a to avoid possible difference of interpretation of the standards for accreditation of mobile labs.

In summary, Chapter 4 states that a mobile laboratory must apply for NELAP accreditation in the state in which it operates, rather than in a different state where the fixed-based parent lab is located. This would pertain to the mobile labs that operate exclusively in a different state than the parent lab. However, Section 6.2.2.a might be interpreted as requiring the mobile lab to apply in the home state of its parent fixed-based laboratory, even if it operates exclusively in another state. To be complete and consistent with Section 4.0, two proposals for revision of Section 6.2.2.a are presented for consideration.

1st Proposal for Revision

6.2.2.a *All county, municipal and non-governmental fixed-base and independent mobile laboratories seeking NELAP accreditation or renewal of NELAP accreditation must apply for such accreditation through their home state (the state in which the laboratory facility is located) accrediting authority. A mobile laboratory that is owned by an accredited fixed-base laboratory and operates within the state in which the parent fixed-base laboratory is located must apply for accreditation through the home state of the parent fixed-base laboratory. A mobile laboratory that is owned by an accredited fixed-base laboratory and operates exclusively within another state, will apply to the state in which the mobile laboratory operates.*

2nd Proposal for Revision

6.2.2.a All county, municipal and non-governmental fixed-base laboratories seeking NELAP accreditation or renewal of NELAP accreditation must apply for such accreditation through their home state (the state in which the laboratory facility is located) accrediting authority. For requirements and procedures for accreditation of mobile laboratories, refer to Chapter 4.

Gleason Wheatley suggested that we refer these proposals of change back to the Chapter 4 committee. Everything unique to mobile labs would refer to that particular section. It was suggested that NELAC address this issue more globally vs. one by one. Mr. Wheatley supports proposal number two, however, he stated that we have a long time before the annual meeting and this is only draft language. A new draft should be ready by NELAC 8.

DISCUSSION ON NELAP SOP'S AND QMP/REPORT ON STATUS OF EPA AA ASSESSMENT

Carol Batterton stated that EPA has submitted an application to become an accrediting authority. An assessment team has been formed consisting of Ken Jackson, Carol Batterton, and Silkie Labie being the lead. They have completed their review of the application. They are currently beginning process of in person interviews. Currently, no time commitments can be given. At this time the completeness of the review of the application is in progress. The assessment team will then proceed with the technical review of the quality system and then the on-site assessment will occur.

Louis Johnson asked if the EPA was following the same documentation and checklist that everyone else has to follow. He also asked if Carol Batterton would give this Committee an update on this issue at the summer meeting. Carol Batterton's answer to both questions was yes, however, she will consult with Silky Labie before reporting.

Joe Slayton, one of the lead assessors, reported that all of the lead assessors have completed and passed the assessor training class. The assessors spent half a week rewriting the accreditation SOP's and have been resubmitted. The series of SOP's follow the exact same procedure as the EPA's and is completely different than NELAP's. There is also separate documentation for doing the renewals and reviews of the AA's than the accreditation SOP's for state labs and federal labs under NELAC.

All documentation will reside with the NELAC director. The NELAP director will also be over the EPA AA. Mr. Johnson asked if this was a direct conflict of interest for the EPA. Joe Slayton reported that the procedure is consistent with the Standards as they are currently written.

The AA committee will continue to assist AARB and NELAP to answer the deficiencies that AARB has found in the SOP documentation. AARB will supply a list of SOP's that are missing/lacking.

REPORT ON WHAT AARB IS AND WILL BE DOING BEFORE NELAC 8

Carol Madding reported that the AARB would be giving a report to the Board of Directors that will include a report of all the new AA's and the EPA. She reported that since NELAC 7 there has been only one new AA. She stated that in the past six months they have been granting 60 day extensions to the AA's while their two-year renewals are in the auditing stages. They are doing these extensions so that the AA's responsibilities did not lapse while they were waiting for renewals. All 60 day extension ran out and the AARB gave them another extension. The current extensions expire at NELAC 8. If extensions are still needed at that time, they will have to be re-approved at NELAC 8.

The responsibilities for AARB in the next six months are to revise AARB's SOP for assessing NALAP AA recognition process, review NELAP documentation control system, and the ISO Guide 61 and Chapter 6 requirements to assess NELAP process for two-year reviews of AA's and to assess NELAP process for recognizing AA's.

One of the AARB's findings in the past was that the documents were spread out and very difficult to find. The AARB determined that all of the records be kept in Las Vegas, NV. They will give all of this information in their mandatory annual report to the Board of Directors.

NEW BUSINESS

Scott Hoatson reported the suggested changes within Chapter 6 are grammatical changes. There was a need to replace "evaluator" with "assessor". By making this change, "evaluator" is eliminated when it should have still been included; therefore, the document needed to be revised again. The correct proposed grammatical changes should be ready by NELAC 8. Margaret Prevost mentioned that the document had already gone through changes concerning reciprocity vs. recognition. There needs to be consistency among the Standards. It was suggested that this Committee review the language.

Roxanne Robinson brought up the issue of where does the Accrediting Authority get due process when it has an issue with initially being denied recognition through the NELAP Director. She stated that section 6.6.d states that, "Within 20 calendar days of receipt of the NELAP evaluation team's recommendation, the NELAP Director shall provide written notification to the Accrediting Authority of acceptance or rejection of the NELAP evaluation team's recommendation." Under the appeals process, found in section 6.11.g it states that, "The ultimate decision to grant, maintain, deny or revoke NELAP recognition remains with the NELAP Director. The NELAP Director shall notify the appealing Accrediting Authority of his/her decision within 20 days of receipt of the recommendation from the AARB." Ms. Robinson stated that legally, that is not an appeal, as you cannot have a final decision on an appeal going back to the same person that originally denied it. Ms. Robinson recommended that, because of the inter-recognition between the states and the Accrediting Authorities, where one state will recognize the other state's laboratories' test data and accept it, the Committee look further into this. She suggested a possible option would be that recognition should first come from approval or recognition from the AA's peers. The other accreditation bodies would then decide whether or not they would want to recognize other AA's data. If an appeal were then necessary because the AA's denial, it would then go to the NELAP

Director.

Ms. Madding stated that if someone has an appeal with no other recourse, they could send it to the AARB. The AARB would review it and make a recommendation, not a decision.

Ms. Prevost agreed that there should be a method for appeals in place. She felt that under the current restructuring, this would be an opportunity to improve the processes. There was general agreement that this is a serious issue and there may be some regulatory issues that need to be dealt with. Mr. Johnson recommended that the Committee should further review this issue and meet with NELAP Director. George Kulasingham recommended that this issue be referred to the Board of Directors. Mr. Johnson agreed and will have the Committee draft some language and prepare a report prior to NELAC 8.

ADJOURNMENT

There being no further business to discuss, the meeting was adjourned at 3:00 EST.

**ACTION ITEMS
ACCREDITING AUTHORITY COMMITTEE MEETING
DECEMBER 06, 2001**

Item No.	Action	Date to be Completed
1.	Committee to review language in Standard for consistency	ASAP
2.	Committee to draft language regarding appeals process.	ASAP

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ACCREDITING AUTHORITY COMMITTEE MEETING
DECEMBER 06, 2001**

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